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|--|------------|---|---|----------|---|----------|---|----------|---|----------|---|------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)   |            | Docket Number (Optional) 176/60851<br>(1-11027-849) |   |          |   |          |   |          |   |          |   |            |
| <b>CERTIFICATE OF MAILING</b><br>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at (703) 308-0294 on October 8, 2003.<br>Signature: <u>Wendy L. Barry</u><br>Name: Wendy L. Barry  |            |   |   |          |   |          |   |          |   |          |   |            |
| In re Application of Barry Hall  |            |   |   |          |   |          |   |          |   |          |   |            |
| Application Number 09/640,882  |            | Filed August 18, 2000                               |   |          |   |          |   |          |   |          |   |            |
| For METHOD OF DETERMINING EVOLUTIONARY POTENTIAL OF MUTANT RESISTANCE GENES AND USE THEREOF TO SCREEN FOR DRUG EFFICACY  |            |   |   |          |   |          |   |          |   |          |   |            |
| Group Art Unit 1637  |            | Examiner K. Horlick                                 |   |          |   |          |   |          |   |          |   |            |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table style="width: 100%;"><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)</td><td style="text-align: right;">\$1,005.00</td></tr></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the above fee and any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1138</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/>Registration number if acting under 37 CFR 1.34(a) _____.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"><u>October 8, 2003</u><br/>Date</div><div style="text-align: center;"><u>Edwin V. Merkel</u><br/>Signature<br/>_____<br/>Edwin V. Merkel<br/>Typed or printed name</div></div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"><input checked="" type="checkbox"/> Total of 1 form is submitted.</div> |            |   | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110) | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420) | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950) | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480) | \$ _____ | <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010) | \$1,005.00 |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)  | \$ _____   |   |   |          |   |          |   |          |   |          |   |            |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)  | \$ _____   |   |   |          |   |          |   |          |   |          |   |            |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)  | \$ _____   |   |   |          |   |          |   |          |   |          |   |            |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)  | \$ _____   |   |   |          |   |          |   |          |   |          |   |            |
| <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)  | \$1,005.00 |   |   |          |   |          |   |          |   |          |   |            |

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